



**STREET & SIDEWALK VENDOR  
STAND  
LICENSE APPLICATION**  
Complete in Duplicate

CITY LICENSE  
(316) 268-4553

STREET AND SIDEWALK FEES	STAND – PRODUCE/PERISHABLES	STAND - ALL OTHERS
_____ \$ 6.25 per day, per vehicle	_____ \$ 6.00 per day	_____ \$ 6.00 per day
_____ \$31.75 per month, per vehicle	_____ \$25.00 for 3 months	_____ \$20.00 per week
_____ \$137.50 per six months, per vehicle	_____ \$50.00 for 6 months	_____ \$25.00 per 6 months
_____ \$250.00 per year, per vehicle		_____ Christmas Tree \$1.50 per day

**BUSINESS INFORMATION:**

BUSINESS NAME		PHONE #	
BUSINESS ADDRESS			
ZIP CODE		STARTING DATE	
TYPE OF MERCHANDISE		ENDING DATE	

**APPLICANT INFORMATION** (must be completed by person signing application):

APPLICANT NAME		PHONE #	
HOME ADDRESS		ZIP CODE	
CITY, STATE		DATE OF BIRTH	

**COMPLETE FOR STREET AND SIDEWALK LICENSE ONLY**

Complete the following for any additional people, who will be riding in the same vehicle-if more room is need, list on back:

NAME		DATE OF BIRTH	
HOME ADDRESS		CITY, STATE, ZIP	

**COMPLETE FOR STAND LICENSE ONLY**

Location of Stand \_\_\_\_\_

Do you have permission from the property owner? \_\_\_\_\_

I, \_\_\_\_\_, the above named applicant, do solemnly swear that I have read the contents of this application and that all information and answers herein contained are complete and true. In addition, I have read and understand all rules and regulations as set out in the City Code of Wichita. Furthermore, I hereby agree to comply with all of the laws of the State of Kansas, and all rules and regulations prescribed by the City of Wichita and I consent to the immediate revocation of my license, by the proper officials, for any violation of such laws, rules or regulations.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

**FOR OFFICIAL USE ONLY**

		APPROVED	DISAPPROVED	DATE
STREET AND SIDEWALK VENDOR	Police Department			
	Health Department			
STAND	Central Inspection			
LICENSE NUMBER		FEE		